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PTO/SB/01 (8-96)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration OR
Submitted
with Initial Filing ☐ Declaration
Submitted after
Initial Filing

Attorney Docket Number **SERVIER 435 PCT**

First Named Inventor

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Association of an Antithrombotic and Aspirin.

(Title of the invention)

the specification of which

☐ is attached hereto
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

PCT/FR2003/00105411

and was amended on (MM/DD/YYYY)

04/04/2003

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02.04222	FRANCE	04/05/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
G. PATRICKKSAGEE	37,710	MICHELE CUDAHY	55,093

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name

Address

Address

City

Country

THE FIRM OF
HUESCHEN AND SAGE

PLLC

ATTORNEYS AND COUNSELORS

500 COLUMBIA PLAZA

350 EAST MICHIGAN AVENUE


KALAMAZOO, MICHIGAN 49007-3856

ZIP

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

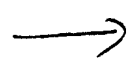
Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name: Tony	Middle Initial	Family Name: VERBEUREN	Suffix e.g. Jr.	Inventor's Signature: 	Date: September 15, 2004
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Residence: City	VERNOUILLET (FR)	State	FR	Country	FRANCE	Citizenship	BE
Post Office Address	60 bis rue Aristide Briand						
Post Office Address							
City	VERNOUILLET (FR)	State	FR	Zip	78540	Country	FRANCE

☒ Additional inventors are being named on supplemental sheet(s) attached hereto



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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name		Gilbert				Middle Initial				Family Name		LAVIELLE				Suffix e.g. Jr.			
Inventor's Signature										Date		September 15, 2004							
Residence: City		LA CELLE SAINT CLOUD				State		FR		Country		FRANCE <i>FRX</i>				Citizenship		FR	
Post Office Address		1 avenue Lily																	
Post Office Address																			
City		LA CELLE SAINT CLOUD				State		FR		Zip		78170		Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name		Bernard				Middle Initial				Family Name		CIMETIERE				Suffix e.g. Jr.			
Inventor's Signature										Date		September 15, 2004							
Residence: City		PARIS				State		FR		Country		FRANCE <i>FRX</i>				Citizenship		FR	
Post Office Address		37 cours de Vincennes																	
Post Office Address																			
City		PARIS				State		FR		Zip		75020		Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name		Marie-Odile				Middle Initial				Family Name		VALLEZ				Suffix e.g. Jr.			
Inventor's Signature										Date		September 15, 2004							
Residence: City		CHAMPS SUR MARNE				State		FR		Country		FRANCE <i>FRX</i>				Citizenship		FR	
Post Office Address		4 allée des Charmilles																	
Post Office Address																			
City		CHAMPS SUR MARNE				State		FR		Zip		77420		Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.			
Inventor's Signature										Date									
Residence: City						State				Country						Citizenship			
Post Office Address																			
Post Office Address																			
City						State				Zip				Country					
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto																			